

U.S. Department Agriculture
Natural Resources Conservation Service

MO-CPA-52
9-98

Environmental Analysis for Conservation Planning

Client: _____
Farm Number: _____
Tract Number: _____
Field Number (s): _____
Evaluation Date: _____

Purpose: This form documents existing resource concerns/conditions and summarizes the effects and impacts of proposed conservation practices and activities on natural, human and cultural resources.

Instructions: This form will be completed for all planning activities on a conservation treatment unit. Indicate with a yes or no, all existing Concerns and Resources present. If an element does not apply, place a "N/A" in the comments block. Under Planning Impact, note whether the conservation activity will have a positive (+) or negative (-) impact. If an adverse impact is noted, explain in Comments section or on an attachment.

Natural Resources

	Existing Concern(s)	Planning Impact	Comments
Soil	_____	_____	_____
Water	_____	_____	_____
Air	_____	_____	_____
Plants	_____	_____	_____
Animals	_____	_____	_____

Human Resources

	Existing Concern(s)	Planning Impact	Comments
Social	_____	_____	_____
Economic	_____	_____	_____

Special Resources *(See NPPH pages MO600.1-10(1-6) for further explanation of categories)*

	Resource(s) Present	Planning Impact	Comments
Prime/statewide farmland	_____	_____	_____
Threatened/endangered species	_____	_____	_____
Landscape resource	_____	_____	_____
Natural areas	_____	_____	_____
Wild and scenic river	_____	_____	_____
Wetland/special aquatic site *	_____	_____	_____
Riparian area	_____	_____	_____
Floodplain management	_____	_____	_____
Stream channel modification *	_____	_____	_____
* Landowner advised that a 404 permit may be required?			No <input type="checkbox"/> Yes <input type="checkbox"/> N/A <input type="checkbox"/>

Cultural Resources *(If "Yes", complete the reverse side of this form.)*

Do the planned practices include an undertaking (practices that may damage cultural resources)? No ☐ Yes ☐
(See 420 General Manual for Missouri listing)

___ To the best of my knowledge, no further environmental analysis is required.

___ To the best of my knowledge, there is or may be an adverse effect on one or more of the environmental aspects?

Evaluation completed by: _____

Cultural Resource Worksheet

Township _____	Range _____	Evaluation Date _____
Section _____	1/4 Section _____	Name of Practice _____
Farm Field Number _____		Tract Number _____

Historic Properties Review

- A. Check the National Register of Historic Places. Site present? Yes ☐ No ☐
- B. Does the Cultural Resources County Map indicate the presence of a known archeological site within the section? Yes ☐ No ☐

If yes, contact the CRC or the CRS for additional site information. Contact may be by email, phone, or fax.

- C. Are there any other buildings or structures of possible historical significance within the area to be treated? Yes ☐ No ☐

If either A or C is "yes", or if the CRC indicates that a known site might be in the Area of Potential Effect (APE), contact your Area Cultural Resource Coordinator (ACRC). The APE will have to be surveyed by an ACRC and/or Cultural Resource Specialist (CRS) if alternatives cannot be developed that do not include undertakings.

Discussion with Owner/Operator

- A. Is the owner and/or operator aware of any historic structural remains such as old farmsteads, mill or logging camps, Indian mounds, graves, or aware of any artifacts that now or in the past occurred within the proposed construction zone? Yes ☐ No ☐

If yes, contact your ACRC for help in filling out the Historical/Archeological New Site Report. The completed report is sent with attached documentation to the State Office CRC. The site will be assessed by the ACRC before a decision is made about having the site surveyed by a CRS. The site form should be filed in the separate 420 file reserved for site specific cultural resource information, and not placed in the case file.

Field Inspection and Appraisal

- A. Date area to be disturbed (APE) was walked and visually searched for physical evidence of historic and/or prehistoric artifacts.

Date: ____/____/____ By: _____

- B. Was anything found? Yes ☐ No ☐

If yes, contact your ACRC for help in filling out form SSC-MO-1, the Historical/Archeological New Site Report. The completed report is sent with attached documentation to the State Office CRC. The site will be assessed by the ACRC before a decision is made about having the site surveyed by a CRS. The site form should be filed in the separate 420 file reserved for site specific cultural resource information, and not placed in the case file.